STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s) Glern R. Milner	
II. Name of lobbyist's partnership, firm or corporation, if any:	
(Name of partnership, firm or corporation)	·
109 NOGH State Street, Suite 9, Concord Business Address: (Street) (Town/City) (S	tate) (Zip Code)
603 <u>\$50-6020</u> (608 <u>505-4652</u> e-mail (Fax)	glennmilner@me.com
III. This statement covers: (Choose one – file separate reports for each client, reportable expense transactions which are not attributable to any one client).	OR you may file a separate report for
All reportable transactions occurring in the months prior to the reporting date re	elative to the following client:
(Full Name of Client as it appears on the Lobbyist Registration Fo	orm)
OR ☐ All reportable transactions by the lobbyist (including the lobbyist's family), or the unrelated to any particular client.	ne lobbying firm listed below which are
IV. Date of Report April 25, 2018 Suly 25, 20 Reports cover: activity from date of registration to 3/31/18 activity from 4/1/1	8 to 6/30/18
October 31, 2018 A January 30 activity from 7/1/18 to 9/30/18 activity from 10/1.	
V. There have been no fees received and no reportable transactions ma If this box is checked, complete just this form and submit it to the Secretary of State Concord, NH 03301.	
VI. Check if additional reports are attached:	
If you have received fees or made expenditures, you must file Addendum A-	
☐ If you have paid an honorarium or reimbursed expenses, you must file Addend Expense Reimbursement	um B- Report of Honorariums or
☐ If you, your firm, or your family has made political contributions, you must file	Addendum C- Political Contributions
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirmand complete to the best of my knowledge and belief.	m that the foregoing information is true
(Signature of obbyist)	DECENTO
(Print Name of lobbyist)	RECEIVED
(I THE HAME OF HOODY 1917)	OCT 2 4 2018
	NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A



(RSA Chapter 15:6)

I. Name of Lobbyist(s)	Glenn R. Miln	er
II. Name of lobbyist's partners	ship, firm or corporation, if any:	
Millione of contrary his	MET & KTUPSKI, PLI p, firm or corporation)	<u> </u>
	ar Association of America, Ivc.	
to lobbying, including fees for ser	tes received from the client identified above rvices such as public advocacy, government gislation, and related legal work. The gr	t relations, or public relations service
a) Total of all fees received in this	s reporting period	a)\$ 10,500.00
	calendar year, prior to this reporting period all prior monthly reports for this calendar y	b) \$ <u>21,000.00</u> ear)
c) Total of all fees received to dat (Add lines a and b)	te	c)\$_31,500.00
d) Indicate the amount of any suc yet been paid	h fees that are due, but have not	d) \$
fees. Separate reports are to be fithe lobbyist(s)/firm that are unrel Expenses are to be reported in or during the reporting period for sa individual expenses where the explunch where the cost was \$25.00 cbeing lobbied, purchase of a ceren (c) an itemized statement of each in any purpose not covered by (a) (ceremonial object to be given to restaurant expenses for a legislati	s, firms, or corporations are required to repited for expenditures made relative to each a lated to any one client a separate report in of three categories of expenses: (a) the claries, benefits, support staff, and office expenditure was of \$25.00 or less (for example) or less, purchase of a pen with a value of lemonial object given to a person being lobbie individual expenditure made during this report for example: purchase of a meal with value the subject of lobbying with a value greate tive reception). Expenses for honorariums, eparate addendums and should not be report	client and if expenditures are made by may be filed for the lobbyist(s)/firm e aggregate total of all expenses paid expenses; (b) the aggregate total of al le: meals purchased during a business ss than \$10 that is given to the person ed with a value of \$25.00 or less); and orting period of greater than \$25.00 for the of greater than \$25, purchase of a er than \$25, but not greater than \$50, expense reimbursement, or political
support staff, and office expenses,	is reporting period for salaries, benefits, related directly or indirectly to lobbying. s during this reporting period, not reported	a) \$ b) \$
c) Total of all itemized expenditur	res reported in detail in section VI	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
/i	\$
	\$
	\$
	\$ <u></u>
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Sworn Statement/Affirmation by Lobbyist	,
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
Melle	10/24/18
(Signature d'lobbyist)	(Date)
(Print Name of lobbyist)	

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